

Executive Summary

Health Care Financing Administration National Medicare Education Program Coordinating Committee Meeting Washington, DC

May 12, 1999

A meeting of the Health Care Financing Administration's National Medicare Education Program (NMEP) was held on Wednesday, May 12, 1999, from 9:00 a.m. to 12:30 p.m., at the Loews L'Enfant Plaza Hotel in Washington, DC. A list of those in attendance is provided in Appendix A.

Meeting Topics and Synopsis

Welcome and Introductions – Carol Cronin

Ms. Cronin opened the meeting, thanked those in attendance for their participation, and asked members to introduce themselves. As an update to the NMEP, she noted the following:

Toll-Free Line (TFL)

- The Medicare Choices Helpline, 1-800-MEDICAR(E), became operational in all 50 States on March 15, 1999, and has received an average of 5,000 calls per week. The average duration of calls is 6 minutes. Nearly half of all calls received, 44 percent, are from the States of New York, California, Florida, and Ohio.
- HCFA is tracking the types of publicity that generate the largest number of calls from beneficiaries.
- HCFA is planning to consolidate the automated TFL for publication orders with the Medicare Choices Helpline by December 1999 or Spring 2000. This will help beneficiaries locate information easier.

Medicare.gov

- The Medicare Web site, **www.medicare.gov**, received 5 million hits in April.
- Another measure of site visits are page views. The Web site received 880,000 hits in April, with the most viewed sites being the comparison data on health plans and the comparison data on nursing homes.
- HCFA intends to upgrade the health plan comparison database to improve its print options.

NMEP Critical Dates Timeline for 1999

C	June	HEDIS data on prior year services due to National Committee for Quality Assurance on June 30.
C	July	Deadline for managed care plans to sign and return their contract to HCFA; deadline for submitting year 2000 capacity limits.
C	Later in the Summer	NMEP Report goes to Congress.
C	September	Comparison data for the year 2000 will be posted on the Web site, www.medicare.gov , by September 15, 1999; handbook mailing begins on a rolling basis between September 15 and October 15, 1999.
C	October	Households with 2-4 beneficiaries will receive one handbook and 1-3 postcards. These postcards will be distributed from October 22 through October 29, 1999.
C	December	1999 NMEP assessment begins.

Assessment of Handbook and Consumer Assessment of Health Plans Survey (CAHPS) in Kansas City— Sherry Terrell

Ms. Terrell presented the results of several assessment activities of the 1999 *Medicare & You* handbook done in 10 counties in the State of Kansas and in Kansas City. The assessment tools included questionnaires, interviews, focus groups, and surveys. The survey respondents included both new and experienced beneficiaries. Focus group participants included the aged, disabled beneficiaries, and those with dual eligibility for Medicare and Medicaid. The primary concern of the assessments was how understandable and comprehensive the information contained in the handbook was to the beneficiaries. The main findings of the focus groups were:

- Beneficiaries found the handbook comprehensive and understandable.
- Beneficiaries used the handbook mostly as a reference, rather than as a tool to make a choice.
- New beneficiaries wanted to receive the handbook earlier in their enrollment process.
- Beneficiaries trusted materials from HCFA rather than materials received from various managed care plans; overall found the slick graphics of managed care plans' materials trustworthy.
- Those with dual eligibility did not find the handbook as informative because it did not contain enough information on the Medicaid Program.

The two surveys conducted used a randomized experimental design consisting of one control group which received no information and three experimental groups, which received either the national bulletin, the *Medicare and You* handbook, or the handbook and the CAHPS Report for the Kansas City Metropolitan Statistical Area. The survey results revealed:

- Among new beneficiaries contacted, 58 percent responded (N=951) to the survey questionnaire.
- Of the experienced beneficiaries contacted, 62 percent responded (N=1,156) to the survey questionnaire.
- Overall results:
 - Access to the 1999 *Medicare & You* handbook improved beneficiary knowledge from 4 percent to 8 percent above persons who did not receive the handbook controlling for education, age, gender, income and other characteristics.
 - All experimental groups were more knowledgeable about Medicare than the control group that received no information.
 - Education was the variable with the greatest impact on how well respondents did on questions concerning their knowledge of the Medicare program.

In 2000, the study will be conducted on a national level.

Update on 2000 Medicare & You Handbook— Mary Agnes Lauren

Ms. Lauren spoke about the vision HCFA has for the year 2000 handbook. That is, HCFA envisions the handbook providing basic Medicare information that is accurate, easy to read and understandable, and with clear referrals so beneficiaries can receive further information. The content of the handbook is mandated by the Balanced Budget Act and will include general information and comparison information for managed care plans.

The customer market that will receive the handbook includes all current domestic Medicare beneficiaries that have valid zip codes, those individuals that are newly eligible to receive Medicare (mailings will be monthly), and people that act on behalf of beneficiaries (such as family members).

Feedback received on the 1999 *Medicare & You* handbook came from a number of different sources. Some of these sources include a low literacy review, ad hoc reviews received through the mail and over the Internet, and evaluation data from Kansas City and the Coordinating Committee. All feedback and lessons learned are being considered in refining the handbook.

The *Medicare & You* handbook is being produced in a number of different versions including:

- Twenty-six geographic cluster versions based on such factors as:
 - HCFA Regional Office boundaries
 - Limited number of lines devoted to plan comparison information
 - Logical combinations of States

- Larger States such as California, Texas, New York, Ohio, and Florida will all receive more than one version of the handbook, with Pennsylvania receiving its own version. All other states will receive multi-state handbooks.
- Puerto Rico will receive a Spanish version unless beneficiaries express a preference for the English version.
- Multihousehold postcards for requesting a copy of the handbook will go to 7 million households
- A generic national version will be available in Spanish and English
- Alternative communication versions will be available in Spanish, braille, and large print; audio versions will be available in both Spanish and English.
- Ten versions of the handbook will contain a feedback card (17 million cards). Those versions are being distributed to the following geographic areas:
 - Upstate New York
 - Pennsylvania
 - North and South Carolina
 - Southern Florida
 - Illinois/Indiana
 - Arkansas/Louisiana/Oklahoma/New Mexico
 - Eastern Ohio
 - Southern and Eastern Texas
 - Northern and Central California
 - Southern California.

Final review of the 2000 *Medicare & You* handbook will be conducted in early June 1999. Fixed portions of the handbook go to the printers on June 23, 1999. The English audio version and braille version will also begin production on June 23, 1999. Managed care plans will be given an opportunity to review the full set of information that will appear on Medicare Compare from September 1 through September 3, 1999.

The changes being made for the 2000 handbook include:

- Making the language of the handbook easier to read
- Providing a low-literacy section on Medicare Basics (pages 1-3) and bullet points for key sections on the cover
- Designing a new layout based on feedback to make the handbook easier to use as a reference guide
- Paring down comparison information to include the plan name, the geographic area the plan handles, customer service telephone numbers, premium information, the number of plans an insurance carrier offers, and which plans provide prescription drugs
- Providing a telephone tree for the 1-800-MEDICAR(E) toll-free line to make navigation of the automated options easier, including detail on where more information can be obtained, such as on Medigap protections.

Fee-For-Service Medicare Health Employer Data Information Set (HEDIS) Measures— Dorothea Musgrave

Ms. Musgrave discussed the issues of quality as assessed through HEDIS measures. HCFA is collecting HEDIS measures (clinical and non-clinical) from managed care plans for the third year. The measures are designed to assist beneficiaries in choosing a health plan based on the quality of care provided by the plan. HCFA will be incorporating the HEDIS results into its monitoring of contracting managed care plans.

Fee-for-service HEDIS measures will be collected by Health Economics Research. They are examining 2 methods for gathering this information, geographically based and through group practices.

What Employers and Unions Are Doing to Educate Retirees About Medicare— Pam Kalen and Maria Lyzen

Ms. Kalen provided information on employers in general and their approach to informing retirees of Medicare + Choice options. Ms. Kalen, who serves as Chair of the Employer Subcommittee, reported that:

- Employers continue to offer Medicare + Choice to their retirees.
- There are concerns about the stability of managed care plans that participate in Medicare + Choice.
- HCFA initiated a conference call to provide information to large employers on the aforementioned issues. The conference call also served to provide the representatives answering 1-800-MEDICAR(E) with information on how employers address their coverage and how they can better direct callers to the correct answers to their questions.
- Caregiver issues include concern about how to decrease the burden to caregivers on obtaining information from employers on coverage.

Ms. Lyzen spoke on the challenge of educating 500,000 General Motors retirees scattered throughout the country on Medicare coverage. For example, they take key Medicare messages and use multiple vehicles to broadcast them, such as the web enrollment, print materials, face to face meetings, satellite broadcast, retiree-only publications, etc. Ms. Lyzen mentioned the primary form of health insurance in the State of Michigan is still fee-for-service. Managed care plans exist but remain immature in their development relative to other States.

What We Have Learned About How Seniors Like to Get Information— C. Anne Harvey and Robert Prisuta

The AARP compiled a survey of Medicare beneficiaries age 65-74 of their awareness of Medicare changes and their preferences for receiving information on Medicare + Choice. The following presents the highlights of the survey results.

- Awareness among Medicare beneficiaries age 65-74 of new health insurance options was just below half (48 percent), with 61 percent aware of Medicare changes without receiving the handbook.

- Overall, respondents had a positive reaction to the information available to them, finding it to be just the right amount of information that was easy to understand.
- Nearly 80 percent responded that they would be very/somewhat confident in making decisions with the information currently available to them.
- Only 11 percent of respondents learned about managed care plans through Medicare.
- Demographic differences were found. Respondents with less education were less likely to have heard about the changes in Medicare, and to have an overall less positive response to the information. AARP members were more likely to be aware of the Medicare changes and to find the information more satisfying. People with lower income levels had lower confidence and satisfaction with the information.

Agenda Items for Next Meeting— All Participants

The next meeting of the NMEP Coordinating Committee is scheduled for September 8, 1999. Carol Cronin suggested the Coordinating Committee meet again in late July to provide updated information on managed care plan nonrenewals. For the September 8 meeting, HCFA is considering a broader meeting involving the entire NMEP Alliance Network. Comments regarding this broader meeting included:

- Concern about the cost of travel to meetings for partners that come from smaller organizations.
- Conduct meetings in different locations around the country.
- Video-conferencing was also suggested as an alternative to traveling.

**National Medicare Education Program
Coordinating Committee Meeting
Loews L'Enfant Plaza Hotel
Washington, DC
May 12, 1999
Attachment A: List of Attendees**

AARP

Ms. Ava Baker
Ms. C. Anne Harvey
Xenia Montenegro, Ph.D.
Robert Prisuta, Ph.D.
Catherine Steele, Ph.D.
Catherine Swank, Ph.D.

Administration on Aging

Ms. Sherri Clark

AFL-CIO

Ms. Marilyn Park

Alzheimer's Association

Katie Maslow

American Association of Health Plans

Ms. Candace Schaller

**American Association of Homes and Services
for the Aged**

Ms. Judy Peres

**American Bar Association,
Commission on Legal Problems of the Elderly**

Ms. Leslie Fried

American Hospital Association

Ms. Ellen Pryga

Bell Atlantic Network Services

Ms. Sheila Meehan

Blue Cross and Blue Shield Association

Ms. Jane Galvin

CHAMPUS/DoD/TRICARE

Ms. Ernestyne Forbes

Consumer Coalition for Quality Health Care

Brian Lindberg

**Department of Health and Human Services
Office of the Assistant Secretary**

Ms. Lisa Lang
Mr. Ariel Winter

EDS

Mr. Jeffery Brooks

Employers' Managed Health Care Association

Ms. Pam Kalen

Families USA Foundation

Ms. Kathleen Haddad

General Motors Corporation

Ms. Maria Lyzen

**Georgetown University Medical Center
Institute for Health Care Research and Policy**

Geraldine Dallek

Health Insurance Association of America

Marianne Miller

Hewitt Associates LLC

Mr. Frank McArdle

International Longevity Center

Mr. Steve Edelstein

**Joint Commission on Accreditation of
Health Care Organizations**

Mr. Anthony Tirone

Kirke-Van Orsdel, Inc.

Mr. Bob Nolan

Medicare Rights Center

Ms. Diane Archer

National Asian Pacific Center on Aging

Mr. Clayton Fong

National Association of Area Agencies on Aging

Ms. Shawn McDermott

National Association of Health Underwriters

Ms. Nancy Trenti

National Association of Insurance Commissioners

Ms. Marcia Marshall

National Caucus and Center on Black Aged, Inc.

Ms. Nancy Caliman

Mr. Chip Kerby

Mr. Ed Susank

**National Committee to Preserve Social Security
and Medicare**

Ms. Danielle Jones

National Council on the Aging, Inc.

Susana Perry

Office of Personnel Management

Ms. Agnes Kalland

Older Women's League

Sarah Gotbaum, Ph.D.

Benjamin Peck, Ph.D.

State Health Insurance and Assistance Programs

Bernice Hutchinson

Towers Perrin

Ms. Laura Donnelly

Ms. Julie Post

Mr. Adam Reese

VHA Inc.

Mr. Edward N. Goodman

Watson Wyatt Worldwide

Ms. Karen Kissam

William M. Mercer, Inc.

IQ Solutions, Inc.

- % Ms. Meredith Mastal
- % Ms. Beth Murphy

Invited Guests

- % Ms. Aimee Schenkel
Consultants for Corporate Benefits
- % Ms. Deborah Milne
Department of Labor
- % Ms. Patricia Wenz
Futures in Rehabilitation Management

Health Care Financing Administration

- % Mr. Peter Ashkenaz
- % Ms. Carol Cronin
- % Ms. Jan Drass
- % Ms. Lis Handley
- % Ms. Rena Judy
- % Mr. Eric Katz
- % Ms. Harriett Kelman
- % Ms. Crystal Kuntz
- % Ms. Mary Agnes Laureno
- % Ms. Paul Mendelsohn
- % Ms. Dorothea Musgrave
- % Barbara Paul, M.D.
- % Mr. Tom Reily
- % Mr. Spencer Schron
- % Mr. Joe Slattery
- % Ms. Sherry Terrell